

Exhibit 1

0949028100599-4

Form **990**
724
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) and section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047
1993
 This Form is Open to Public Inspection

Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 1993 calendar year, OR tax year period beginning MAY 1, 1993, and ending APRIL 30, 1994

B Check if:
☒ Initial return
☐ Final return
☐ Amended return
☐ Change of address

C Name of organization
BENEVOLENCE INTERNATIONAL FOUNDATION
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. Box 548
 City, town, or post office, state, and ZIP code
WORTH, IL 60482

D Employer identification number
363823186

E State registration number

F Check ☐ if exemption application is pending

G Type of organization—☒ Exempt under section 501(c)(3) (insert number) OR ☐ section 4947(a)(1) nonexempt charitable trust
 Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H(a) Is this a group return filed for affiliates? ☐ Yes ☒ No
 (b) If "Yes," enter the number of affiliates for which this return is filed: N/A
 (c) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I If either box in H is checked "Yes," enter four-digit group exemption number (GEN)

J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify)

K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	SEE SCH "I"	1a	1,163,230
	b	Indirect public support		1b	-
	c	Government contributions (grants)		1c	-
	d	Total (add lines 1a through 1c) (attach schedule—see instructions)		1d	1,163,230
		(cash \$ _____ noncash \$ _____)			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	-
	3	Membership dues and assessments (see instructions)		3	-
	4	Interest on savings and temporary cash investments		4	-
	5	Dividends and interest from securities		5	-
	6a	Gross rents		6a	
	b	Less: rental expenses		6b	
	c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	-
	7	Other investment income (describe <u> </u>)		7	-
	8a	Gross amount from sale of assets other than inventory	(A) Securities		
	b	Less: cost or other basis and sales expenses		8a	
	c	Gain or (loss) (attach schedule)		8b	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))		8c	
	8d			8d	
		9	Special events and activities (attach schedule—see instructions):		
a		Gross revenue (not including \$ _____ of contributions reported on line 1a)		9a	
b		Less: direct expenses other than fundraising expenses		9b	
c		Net income or (loss) from special events (subtract line 9b from line 9a)		9c	
10a		Gross sales of inventory, less returns and allowances		10a	
b		Less: cost of goods sold		10b	
c		Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	
11		Other revenue (from Part VII, line 103)		11	
12		Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	1,163,230
Expenses		13	Program services (from line 44, column (B)—see instructions)		13
	14	Management and general (from line 44, column (C)—see instructions)		14	134,688
	15	Fundraising (from line 44, column (D)—see instructions)		15	-
	16	Payments to affiliates (attach schedule—see instructions)		16	-
	17	Total expenses (add lines 13 and 14, column (A))		17	945,149
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	218,081
	19	Net assets or fund balances at beginning of year (from line 74, column (A))		19	-
	20	Other changes in net assets or fund balances (attach explanation)		20	-
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	218,081

Form 990 (1993)

BENEVOLENCE INT'L FOUNDATION

FIN: 36-3823186

Y/E: 4-30-94 Page 2

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) <u>SCH. 24</u> (cash \$ <u>786,521</u> noncash \$ _____)	22 786,521	786,521		
23	Specific assistance to individuals (attach schedule)	23 -	-		
24	Benefits paid to or for members (attach schedule)	24 -	-		
25	Compensation of officers, directors, etc.	25 -	-		
26	Other salaries and wages	26 30,546	15,273	15,273	N/A
27	Pension plan contributions	27 -	-	-	
28	Other employee benefits	28 -	-	-	
29	Payroll taxes	29 1,328	664	664	
30	Professional fundraising fees	30 -	-	-	
31	Accounting fees	31 -	-	-	
32	Legal fees	32 3,489	-	3,489	
33	Supplies	33 21,246	-	21,246	
34	Telephone	34 12,833	-	12,833	
35	Postage and shipping	35 8,858	-	8,858	
36	Occupancy	36 21,890	-	21,890	
37	Equipment rental and maintenance	37 -	-	-	
38	Printing and publications	38 5,792	-	5,792	
39	Travel	39 15,613	-	15,613	
40	Conferences, conventions, and meetings	40 -	-	-	
41	Interest <u>MISCELLANEOUS</u>	41 3,954	-	3,954	
42	Depreciation, depletion, etc. (attach schedule)	42 3,165	-	3,165	
43	Other expenses (itemize): a <u>PROMOTIONS</u>	43a 903	-	903	
	b <u>CANADA OFFICE EXPENSES</u>	43b 16,572	-	16,572	
	c <u>AUTO EXPENSE</u>	43c 3,700	-	3,700	
	d <u>SECURITY</u>	43d 736	-	736	
	e <u>ADVERTISING</u>	43e 8,003	8,003	-	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 945,149	810,461	134,688	

Reporting of Joint Costs.—Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A; (ii) the amount allocated to Program services \$ N/A; (iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A.

Part III Statement of Program Service Accomplishments (See instructions.)

Describe what was achieved in carrying out the organization's exempt purposes. Fully describe the services provided; the number of persons benefited; or other relevant information for each program title. Section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.

	Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
a THE ORGANIZATION AIMS AT HELPING THOSE WHO ARE IN NEED THROUGHOUT THE WORLD, INCLUDING BUT NOT LIMITED TO: THE CONSTRUCTION & OPERATION OF SCHOOLS, HOSPITALS, SCIENTIFIC INSTITUTIONS OF ALL KINDS, CULTURAL AND RELIGIOUS CENTRES, ORPHANAGES & SOCIAL SERVICE CENTERS, GUARDIANSHIP (Grants and allocations \$ _____)	
b OF ORPHANS AND CARING FOR THE NEEDY FAMILIES WHO HAVE NO SUPPORTER, THE COMPILATION AND PRINTING OF BOOKS & TAPES OF ALL KINDS AS WELL AS THE ISSUANCE OF NEWSPAPERS, MAGAZINES AND PUBLICATIONS FOR EDUCATIONAL, CULTURAL & GUIDANCE PURPOSES. (Grants and allocations \$ _____)	810,461
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total (add lines a through e) (Grants and allocations \$ _____)	810,461

PUBLICATIONS

Form 990 (1993)

BENEVOLENCE INT'L FOUNDATION

EIN: 36-3823186
Y/E: 4-30-94 Page 3**Part IV Balance Sheets**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets			
45	Cash—non-interest-bearing	—	45 201,225
46	Savings and temporary cash investments	—	46 —
47a	Accounts receivable	—	47a —
b	Less: allowance for doubtful accounts	—	47b —
48a	Pledges receivable	—	48a —
b	Less: allowance for doubtful accounts	—	48b —
49	Grants receivable	—	49 —
50	Receivables due from officers, directors, trustees, and key employees (attach schedule)	—	50 —
51a	Other notes and loans receivable (attach schedule)	—	51a —
b	Less: allowance for doubtful accounts	—	51b —
52	Inventories for sale or use	—	52 —
53	Prepaid expenses and deferred charges	—	53 —
54	Investments—securities (attach schedule)	—	54 —
55a	Investments—land, buildings, and equipment: basis	—	55a —
b	Less: accumulated depreciation (attach schedule)	—	55b —
56	Investments—other (attach schedule)	—	56 —
57a	Land, buildings, and equipment: basis	19,956	57a 19,956
b	Less: accumulated depreciation (attach schedule)	3,165	57b 3,165
58	Other assets (describe ► RENT SECURITY DEPOSIT)	—	58 800
59	Total assets (add lines 45 through 58) (must equal line 75)	—	59 218,816
Liabilities			
60	Accounts payable and accrued expenses	—	60 735
61	Grants payable	—	61 —
62	Support and revenue designated for future periods (attach schedule)	—	62 —
63	Loans from officers, directors, trustees, and key employees (attach schedule)	—	63 —
64a	Tax-exempt bond liabilities (attach schedule)	—	64a —
b	Mortgages and other notes payable (attach schedule)	—	64b —
65	Other liabilities (describe ►)	—	65 —
66	Total liabilities (add lines 60 through 65)	—	66 735
Fund Balances or Net Assets			
Organizations that use fund accounting, check here <input checked="" type="checkbox"/> and complete lines 67 through 70 and lines 74 and 75 (see instructions).			
67a	Current unrestricted fund	—	67a 47,674
b	Current restricted fund	—	67b 170,405
68	Land, buildings, and equipment fund	—	68 —
69	Endowment fund	—	69 —
70	Other funds (describe ►)	—	70 —
Organizations that do not use fund accounting, check here <input type="checkbox"/> and complete lines 71 through 75 (see instructions).			
71	Capital stock or trust principal	—	71 —
72	Paid-in or capital surplus	—	72 —
73	Retained earnings or accumulated income	—	73 —
74	Total fund balances or net assets (add lines 67a through 70 OR lines 71 through 73; column (A) must equal line 19 and column (B) must equal line 21)	—	74 218,081
75	Total liabilities and fund balances/net assets (add lines 66 and 74)	—	75 218,816

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How to obtain this information in such cases may be determined by the information presented on its return. Therefore, please make certain that the information is true and accurate and fully describes the organization's programs and accomplishments.

Form 990 (1993) BENEVOLENCE INT'L FOUNDATION

EIN: 36-3829186

Y/E: 4-30-94 Page 4

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated (see instructions).)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<u>HOEL ABDEL JAIL BATTERJEE</u>	<u>PRESIDENT - PART</u>	<u>-0-</u>	<u>NONE</u>	<u>NONE</u>
<u>SHAHIC ABDEL RAOUF BATTERJEE</u>	<u>V.P. - PART</u>	<u>-0-</u>	<u>NONE</u>	<u>NONE</u>
<u>MARZIN M.S. BATTERJEE</u>	<u>SEC.Y - PART</u>	<u>-0-</u>	<u>NONE</u>	<u>NONE</u>
<u>ENAM ARNAOUT</u>	<u>EXEC. DIR. - FULL</u>	<u>11,146</u>	<u>NONE</u>	<u>NONE</u>
<u>ALL OF THE ABOVE COULD BE COMPENSATED AT: P.O. BOX 548, WOODHILL, IL 60192</u>	<u>TOTALS</u>		<u>NONE</u>	<u>NONE</u>

Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule—see instructions.

Part VI Other Information

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76	X
77 Were any changes made in the organizing or governing documents, but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement; see instructions.	79	X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? (See instructions.)	80a	X
b If "Yes," enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a Enter the amount of political expenditures, direct or indirect, as described in the instructions. [81a] <u>NONE</u>	81a	N/A
b Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year?	81b	N/A
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.) [82b] <u>N/A</u>	82b	N/A
83 Did the organization comply with the public inspection requirements for returns and exemption applications?	83	X
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? (See General Instruction M.)	84b	N/A
85 Section 501(c)(4), (5), or (6) organizations.—a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" to either 85a or 85b, do not complete 85c through 85h below.	85b	N/A
c Dues, assessments, and similar amounts from members for January 1994 and later.	85c	N/A
d Section 162(e) lobbying and political expenditures after December 1993.	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e; (see instructions).)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
h Does the organization elect to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 Section 501(c)(7) organizations.—Enter:		
a Initiation fees and capital contributions included on line 12.	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities (See instructions.)	86b	N/A
87a Section 501(c)(12) organizations.—Enter: Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX.	88	X
89 Public interest law firms.—Attach information described in the instructions.		
90 List the states in which a copy of this return is filed <u>ILLINOIS</u>		
91 The books are in care of <u>ENAM ARNAOUT</u> Telephone no. <u>(708) 233-0062</u> located at <u>PO BOX 548, WOODHILL, IL</u> ZIP code <u>60192</u>		
92 Section 4947(a)(1) non-exempt charitable trusts filing Form 990 in lieu of Form 1041, U.S. Fiduciary Income Tax Return, should check here <input type="checkbox"/> and enter the amount of assets, liabilities, and net assets received or accrued during the tax year. <u>92</u>		

PUBLIC INS.

Form 990 (1993)

BENEVOLENCE INT'L FOUNDATION

EIN: 36-3823186

Y/E: 4-30-94 Page 5

Part VII Analysis of Income-Producing Activities N/A

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income (See instructions.)
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D); and (E))					
105 TOTAL (add line 104, columns (B), (D), and (E)).					

Note: (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.)

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes N/A

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). (See instructions.)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	
146	
147	
148	
149	
150	

Part IX Information Regarding Taxable Subsidiaries (Complete this Part if the "Yes" box on line 88 is checked.) N/A

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
	%			
	%			
	%			
	%			

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

Paid Preparer's Use Only

Preparer's signature

Date

Check if self-employed ☒

Preparer's social security no.

Firm's name (print or type)

JOHN KASPEREK & CO, CPA

E.I. No.

ZIP code

36

60409

PUBLIC INFO.

Form 990 SCHEDULE "2"NAME BENEVOLENCE INTERNATIONAL FOUNDATIONEIN: 36-3823186ADDRESS P.O. Box 548

Calendar Year _____

WORTH, IL 60482Fiscal Year Ended 4-30-94

PAGE 2, PART II, LINE 22- GRANTS & ALLOCATIONS:

GEN'L RELIEF EFFORTS TO BOSNIA

\$ 11,000

SHI-FA HOSPITAL, ISLAM ABAD, PAKISTAN

90,000

SHI-FA FOUNDATION, ISLAM ABAD, PAKISTAN

110,000

WINTER CLOTHING TO BOSNIA

200,000

GEN'L RELIEF EFFORTS TO CROATIA

280,000

ADVERTISING CAMPAIGN FOR RELIEF TO BOSNIA

92,521

WOMEN FOR WOMEN

3,000

TOTAL

\$ 786,521

PUBLIC INS

EIN: 36-3823186

F/E: 4-30-94 Page 2

Schedule A (Form 990) 1993 **BENEVOLENCE INTL FOUNDATION****Part III Reason for Non-Private Foundation Status** (See instructions for definitions.)The organization is not a private foundation because it is (please check only **ONE** applicable box):

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ►
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** below.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** below.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** below.)
- 12 ☐ An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions -- subject to certain exceptions. See section 509(a)(2). (Also complete the **Support Schedule** below.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) boxes 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions for Part IV, line 13.) *N/A*

(a) Name(s) of supported organization(s)	(b) Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)**Support Schedule** (Complete only if you checked a box on lines 10, 11, or 12 above.) Use cash method of accounting.*FIRST YEAR OF OPERATION 4/30/94***Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar yr. (or fiscal yr. beg.) ►	(a) 1992	(b) 1991	(c) 1990	(d) 1989	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for organization's benefit and either paid to it or expended on its behalf					
21 Value of services/facilities furnished to organization by governmental unit without charge. Do not include value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described in box 10 or 11:a Enter 2% of amount in column (e), line 24. *N/A*b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1988 through 1992 exceeded the amount shown in line 28a. Enter the sum of all these excess amounts here. *N/A*

Schedule A (Form 990) 1993

BENEVOLENCE INT'L FOUNDATION

EIN: 36-3823186

P/E: 4-30-94 Page 3

Part IV Support Schedule (continued) (Complete only if you checked a box on lines 10, 11, or 12.)**27 Organizations described on line 12:**

- a** Attach a list, for amounts shown on lines 15, 16, and 17, to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year:

(1992) N/A (1991) N/A (1990) N/A (1989) N/A

- b** Attach a list to show, for 1989 through 1992, the name of, and amount included in line 17 for, each person (other than a "disqualified person") from whom the organization received, during that year, an amount that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. Include organizations described in lines 5 through 11, as well as individuals. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year:

(1992) N/A (1991) N/A (1990) N/A (1989) N/A

- 28** For an organization described in line 10, 11, or 12, that received any unusual grants during 1989 through 1992, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See Instructions.) N/A

Part IV Private School Questionnaire N/A
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance? (See instructions.)		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended?		
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-60, <u>REG-100</u> , nondiscrimination? If "No," attach explanation. (See Instructions for Part V.)		

Schedule A (Form 990) 1993

Page 4

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check here **a** If the organization belongs to an affiliated group (see instructions).Check here **b** If you checked **a** and "limited control" provisions apply (see instructions).**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures (see Part VI-A instructions)	39	
40 Total exempt purpose expenditures (add lines 38 and 39) (see instructions)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table--		
If the amount on line 40 is --		
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000 ..	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000 ..	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000 ..	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: File Form 4720 if there is an amount on either line 43 or line 44.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1993	(b) 1992	(c) 1991	(d) 1990	(e) Total
45 Lobbying nontaxable amount (see instructions)					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures (see instructions)					
48 Grassroots nontaxable amount (see instructions)					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures (see instructions)					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(I) Cash

(II) Other assets.....

Other transactions:

(i) Sales of assets to a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities or equipment

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

H733

FORM 990A SCHEDULE "1"NAME: BENEVOLENCE INTERNATIONAL FOUNDATIONEIN: 36-3823186ADDRESS: P.O. Box 518

Calendar Year _____

WORTH, IL 60482Fiscal Year ended 4-30-94Form 990 - SCHEDULE "A"PAGE 1, PART III, LINE 2 (d)

THE EXECUTIVE DIRECTOR IS REIMBURSED FOR
OUT-OF-POCKET EXPENSES INCURRED IN BUSINESS
INCLUDING:

TRAVEL, PROMOTION MEETINGS & OFFICE EXPENSES.
THESE REIMBURSEMENTS ARE INCLUDED IN EXPENSES
REPORTED ON FORM 990, PART II.

PAGE 1, PART III, LINE 4

THE EXECUTIVE BOARD DOES NOT MAKE LOANS
TO OTHER ORGANIZATIONS. CURRENTLY, THE
BOARD IS CONCENTRATING ITS MONIES
TOWARD RELIEF EFFORTS IN BOSNIA &
CROATIA, WHICH INCLUDES ASSISTING FINANCIALLY
IN SCHOOLS, HOSPITALS, FOOD & CLOTHING.

PUBLIC INS.